

## Health Insurance Reform

### DAILY MYTHBUSTER: Impact on Seniors

Health insurance reform opponents continue to spread myths about components of [America's Affordable Health Choices Act](#). Their efforts to scare seniors have spared no myth, no method and no misrepresentation. It has gotten so bad, the *Chicago Tribune's* The Swamp blog wrote, "In political circles, there is a term for the tactic" Republicans are using to frighten seniors about the effects of health insurance reform: "Medi-scare".

According to The Swamp, Republicans are "capitalizing on fears that Medicare will be undermined ... and that the government will force 'end-of-life' decisions... It's one rhetorical stop short of warning of the 'death panels' that Republican Sarah Palin has spoken of ...."

Just like busting the "death panels" myth, we will not rest until the seniors get the real facts they need to cut through the misinformation:

**Myth:** Under health reform, a government panel or bureaucrat will tell me when to die.

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**Fact:** Decisions about your health will still be made by you, your doctor, and your family. The House bill simply provides Medicare reimbursement to doctors for spending time with patients who wish to speak with their doctors about their values and preferences regarding end-of-life care – empowering older Americans to have their wishes observed—and a policy supported by Republicans until this debate. Any end-of-life care conversations are only at a patient's request.

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Some scare tactics have focused on “comparative effectiveness research” in the bill to try to claim government panels would decide what care you can get. The bill explicitly prohibits the Center for Comparative Effectiveness Research and the Comparative Effectiveness Research Commission from using this research to define, limit, or deny any treatment or services. In reality, this research would provide doctors with the best information on what treatments work – in effect, making them smarter and better able to treat you.

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**Myth:** Health care reform will lead to rationed care.

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**Fact:** Nothing will stand between you and your doctor, or prevent you from making the best health care decisions. Reform actually takes insurance company bureaucrats out of the decision process for your family—and if you're enrolled in Medicare—improves

the level of care you get, at a lower cost, with no government bureaucrats making decisions for you.

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**Myth:** *Health care reform is a government takeover.*

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**Fact:** Under this bill, there is no government takeover of health care.□ Every American will still be able to choose your own doctor and health insurance plan— and make care decisions with that doctor.□ The House bill builds on the current system of private health insurance.□ Indeed, according to the nonpartisan Congressional Budget Office, private insurance coverage will expand by 16 million under the House reform bill.□ CBO projects that only a total of about 11 million – or 3 percent of Americans – would choose to enroll in a newly-formed public health insurance plan.□

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**Myth:** *Health care reform will end Medicare.*□

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**Fact:** Reform is about strengthening Medicare—a part of our health care system that's working well.□ For Medicare enrollees, the House bill lowers prescription drug costs, makes preventive care free, ensures that you can keep your doctor, and improves the quality of your care.

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**Myth:** *We can't afford to fix health care during an economic crisis.*

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**Fact:** We can't afford not to fix it.□ Rising health care costs are hurting our families and businesses now, and driving up the budget deficit.□ If we do nothing, the cost of health care premiums will eat up more and more of your monthly check—and the prescription drug 'doughnut hole' won't get fixed.